

North Carolina Department of Health and Human Services  
Division of Mental Health, Developmental Disabilities, and Substance Abuse Services  
Community Policy Management Section

**Work First/CPS/SA Initiative**  
**Quarterly Project Report of \_\_\_\_\_ LME**

			<i><b>DUE</b></i>
Report Quarter:	<input type="checkbox"/>	<b>1<sup>st</sup> Quarter, SFY 06-07</b> (July 1 – Sep. 30, 2006)	Oct. 20, 2006
	<input type="checkbox"/>	<b>2<sup>nd</sup> Quarter, SFY 06-07</b> (Oct. 1 – Dec. 31, 2006)	Jan. 20, 2007
	<input type="checkbox"/>	<b>3<sup>rd</sup> Quarter, SFY 06-07</b> (Jan. 1 – Mar. 31, 2007)	Apr. 20, 2007
	<input type="checkbox"/>	<b>4<sup>th</sup> Quarter, SFY 06-07</b> (Apr. 1, - June 30, 2007)	July. 20, 2007

**Submitted By:**

\_\_\_\_\_  
**LME Employee** Coordinating WF/CPS/SA Initiative (Name, Title, Email & Signature)      Date Signed

\_\_\_\_\_  
LME Project Fiscal Officer (Name, Title, Email, Signature)      Date Signed

**I. LME and Contract Staffing of WF/CPS/SA Initiative on Last Day of This Report Quarter (Add rows as needed)**

Name	Organization/Provider Agency, Title and Credential/License	FTE Devoted to Project
<b>TOTAL</b>		

**II. Unduplicated Count of Persons Served (Add columns and include name of corresponding county as appropriate)**

	County Name	County Name	County Name	County Name
Unduplicated Count of WF Referrals from DSS this Quarter				
Unduplicated Count of CPS Referrals from DSS this Quarter				
Unduplicated Count of Class H or I Controlled Substance Felons				
Unduplicated Count Of Persons Served this Quarter <b>TOTAL</b>				

**III. Staff and Caseload Data**

Staff Name & Employed By	Caseload Number
TOTAL	

**IV. Highlights of Activities and Accomplishments During This Quarter**

--

**V. Highlights of Barriers and Difficulties During This Quarter**

--

**IX. Submit Quarterly Reports on 20<sup>th</sup> of each month following the end of the report quarter to:**

*Original with Signatures:*

Smith Worth, WF/CPS/SA Project Director, Community Policy Management Section, Division of MH/DD/SAS, 3007 Mail Service Center, Raleigh, NC 27699-3007

*Copies by E-Mail:* Smith Worth, [smith.worth@ncmail.net](mailto:smith.worth@ncmail.net)

*For further information, please contact:* Smith Worth at or Telephone (919) 733-0696

**LME to Copy DSS**